



## WEED FREE FORAGE TRANSIT CERTIFICATE APPLICATION

**PLEASE TYPE or PRINT THIS FORM AND RETURN IT TO:**

Kansas Department of Agriculture  
Plant Protection & Weed Control Program  
1320 Research Park Drive  
Manhattan, Kansas 66502

Telephone: 785-564-6698  
FAX: 785-564-6779  
Email: [ppwc@kda.ks.gov](mailto:ppwc@kda.ks.gov)

<b>Applicant Name and Address</b>	<b>Transporter Name and Address:</b> (If Different than Applicant)
<b>Phone:</b> _____ <b>Fax:</b> _____	
<b>Consignee Name and Address:</b>	<b>Date Needed:</b>
<b>Truck/Trailer Tag Number:</b>	<b>Destination:</b>
<b>Inspection Certificate Number:</b>	<b>Commodity/Forage Type:</b>
<b>Number of Bales (or Tonnage):</b>	<b>Package/Bale Size:</b>
<b>Applicant Name and Address</b>	<b>Transporter Name and Address:</b>

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

If you wish to have the original certificate returned by express delivery, please complete the following:

EXPRESS COMPANY:

EXPRESS DELIVER TO: (If other than applicant)

YOUR ACCOUNT NUMBER:

## Instructions for Completing the Weed Free Forage Transit Certificate Application

### **DO NOT USE ABBREVIATIONS**

#### **1) APPLICANT NAME AND ADDRESS:**

As the heading states, the information in this section is to be the Name and Address of the Company, individual, corporation etc. who is filling out this form. Applicant will be billed for the certificate.

#### **2) TRANSPORTER NAME & ADDRESS:**

If different than the applicant, please include the transporter's name and address.

#### **3) CONSIGNEE NAME & ADDRESS:**

This section is used to specify the name and address of the consignee. **CAUTION:** Never enter more than one consignee's name in these blanks.

#### **4) DATE NEEDED:**

Here enter the date by which you would like to receive the Certificate at your office.

#### **5) TRUCK/TRAILER TAG NUMBER:**

Enter the truck and trailer tag number of the truck and trailer that will be used to transport the forage/mulch.

#### **6) DESTINATION:**

Indicate the exact destination of the forage or mulch. Please include city and state.

#### **7) INSPECTION CERTIFICATE NUMBER:**

Include the Inspection Certificate Number of the Forage/Mulch being shipped. This number can be found on the lower half of the Certificate of Inspection document. Please contact the office if Inspection Certificate Number is unknown.

#### **8) COMMODITY/FORAGE TYPE:**

The information in this section will include the type of forage being shipped. Examples include: Smooth Brome, Mixed Forage Grasses, Wheat Straw, etc.

#### **9) NUMBER OF BALES (OR TONNAGE):**

Please include the total number of bales being shipped. Total tonnage may also be included.

#### **10) PACKAGE/BALE SIZE:**

Indicate the bale size being shipped. Examples include: small square, large round, etc.

#### **11) EXPRESS DELIVERY INFORMATION:**

If the certificate is to be forwarded to you by express delivery fill in the information requested in these three sections. Please provide a telephone number for the express delivery forms.